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U.S. DEPARTMENT OF HEALTH, EDUCATION, AND WELFARE / PUBLIC HEALTH SERVICE FEALTH SERVICES AND MENTAL HEALTH ADMINISTRATION

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EPIDEMIOLOGIC NOTES AND REPORTS INFECTIOUS HEPATITIS OUTBREAK College of the Holy Cross, Worcester, Massachusetts

Between Sept. 20 and Oct. 4, 1969, 26 icteric cases of infectious hepatitis (Figure 1) developed among the members and staff of the varsity football team of the College of the Holy Cross in Worcester, Massachusetts. The illnesses were of abrupt onset and were characterized by malaise, weakness, fever, nausea, abdominal pain, dark urine, and jaundice. Appropriate tests of hepatic function were consistent with the diagnosis of infectious hepatitis. The jaundiced patients, all males, were between 19 and 22 years of age with the exception of the team trainer who was 40. Liver function studies were performed on the remaining asymptomatic varsity football players, coaches, and managers (total 65). Of the 65, 59 (91 percent) were

CONTENTS

pidemiologic Notes and Reports	
Infectious Hepatitis Outbreak - College of the	
Holy Cross, Worcester, Massachusetts	57
Hepatitis - South Carolina	58
"Daphne Sore" - Alabama	59

found to have significantly increased serum glutamic pyruvic transaminase (SGPT) levels (greater than 100 units). Other athletes, including members of the freshman football and rugby teams, were symptom free and had normal laboratory tests. The clustering of cases over a short period of time coupled with the absence of known exposure to other hepatitis cases, ingestion of raw shellfish, or inoculations supported the hypothesis of a common source outbreak. The varsity football team reported for practice on August 26 (Continued on page 358)

TABLE I. CASES OF SPECIFIED NOTIFIABLE DISEASES: UNITED STATES (Cumulative totals include revised and delayed reports through previous weeks)

	41st WEE	K ENDED	MEDIAN	CUMULATIVE, FIRST 41 WEEKS				
DISEASE	October 11, 1969	October 12, 1968	1964 - 1968	1969	1968	MEDIAN 1964 - 1968		
Aseptic meningitis	165	159	80	2,689	3,431	2,302		
Piucellosis	6	5	6	182	182	202		
printineria	3	4	4	138	166	153		
Incephalitis, primary:								
Arthropod-horne & unspecified	39	57	47	999	1,089	1,472		
dicephalitis, post-infectious	3	4	4	259	401	621		
epatitis, serum	95	108	1	4,126	3,500	00 440		
epatitis infectious	923	1,041	681	36,816	35,328	30,442		
alaria	69	101	18	2,304	1,834	342		
casies (rubeola)	135	122	679	21,000	20,122	191,496		
Tellingococcal infections, total	29	30	35	2,469	2,135	2,191		
Civilian	29	28		2,263	1,951			
Willtary		2		206	184			
unips	774	1,107		70,639	128,390			
onomyentis, total	2		_	15	48	48		
1 aralytic	$\frac{-}{2}$		_	14	48	48		
^{dube} lla (German measles)	337	265		50,351	44,889	10		
ureptococcal sore throat & scarlet fever.	6.409	7,047	6,266	330,398	331,141	331,141		
etanus	2	8	6	121	138	180		
diaremia	<u></u>	2	2	115	157	157		
Juiold fever	10	12	11	245	305	333		
Sprius, tick-borne (Rky, Mt. spotted fever) .	5	1	4	415	262	243		
vabies in animals	41	58	65	2 729	2 788	3 496		

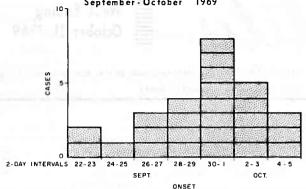
TABLE II. NOTIFIABLE DISEASES OF LOW FREQUENCY

	Cum.		Cum.
Anthrax: Botulism: Leptospirosis: * Fla2 Plague: Psittacosis: Calif1, Fla1, Wis1.	12 64 3	Rabies in man: Rubella congenital syndrome: Trichinosis: Fla1 Typhus, murine:	9 163

Delayed Reports: Leptospirosis: S.C. 1

HEPATITIS - (Continued from front page)

Figure 1
26 Icteric Cases of Infectious Hepatitis by Date of Onset
College of the Holy Cross, Worcester, Massachusetts
September - October 1969



and the freshman team on September 3. Both teams used the same athletic and dining facilities, and consequently since no cases occurred in freshman players, the exposure period was presumed to be between these two dates.

Epidemiologic investigation has failed to incriminate any events or foods which could have been responsible for the outbreak, but has focused attention on the practice football field at the College. Several inadequacies in the field's water system were recognized. The faucet used to provide drinking water is at the end of a series of five irrigation outlets, which are positioned 6 inches below ground surface. The drinking water faucet lies in the dependent portion of the system, $5\ 1/2$ ft. below the level of the irrigation outlets. Dye studies conducted at the field have shown that under certain circumstances surface water may directly enter the water line.

Children living adjacent to the practice field customarily use it as a playground. They frequently turn on the irrigation outlets and bathe in the spray. The children are reported to occasionally use the area as a bathroom facility and have been seen urinating; acts of defecation are suspected. Within the 6 weeks prior to the onset of the outbreak, five cases of hepatitis occurred in persons living in a deteriorated, unsanitary house immediately adjacent to the field. Four of these individuals were under 14 years of age and regularly play on the practice field. Continued investigation is in progress.

(Reported by Leonard J. Morse, M.D., Head, Section of Infectious Diseases, St. Vincent Hospital, Assistant Professor of Medicine, Georgetown University School of Medicine, and Consultant to the Worcester Department of Public Health; Arnold Gurwitz, M.D., Commissioner of Health, Worcester Department of Public Health; Eugene E. Reilly, Jr., Epidemiologist, and Nicholas Fiumara, M.D., Director, Division of Communicable Diseases, Massachusetts State Health Department; and an EIS Officer.)

HEPATITIS - South Carolina

Between Sept. 16 and 23, 1969, 14 members of a Boy Scout Troop at Shaw AFB, Sumter, South Carolina, were admitted to the base hospital with infectious hepatitis. One was an adult, age 23, and the rest were between 11 and 15 years of age. All had participated in a camp-out held between August 14 and 17 on an island in a nearby recreation area; all had attended the camp for a majority of the 4 days and had spent at least one night there. The first four patients had had acute onset of malaise, fever, weakness, and anorexia followed by dark urine; all had abnormal liver function tests. The remaining 10 cases were found by a liver function test survey of the 36 other campers, who had attended the camp for varying periods of time. These 10 had elevated serum transaminase and recalled having slight malaise, anorexia, and darkening of the urine within the previous 7 to 10 days.

There was no known occasion other than the camp-out where all 14 patients could have been exposed. None of the 14 recalled having had contact with a known case of viral hepatitis or gave a history of raw shellfish ingestion or blood transfusion within the 2 months prior to illness. No illnesses suggesting hepatitis were reported among their household members. These facts together with the clustering of onsets of illness and the interval between attendance at the camp-out and onset of symptoms (28 to 32 days) suggest a common source exposure occurring sometime during the camp-out.

At the camp-out, cooking and eating were done in small groups of three to six persons. No single food except water-melon was eaten by a majority of patients, but it was eaten just as frequently by persons who did not become ill. There is no water supply on the island and water for drinking, cooking, and dishwashing was obtained from an approved source on the mainland; however, some persons (both ill and not ill) drank, cooked, and washed dishes in untreated lake water. All campers swam in the lake during the campout. Water samples, obtained periodically from the lake, have demonstrated elevated coliform counts.

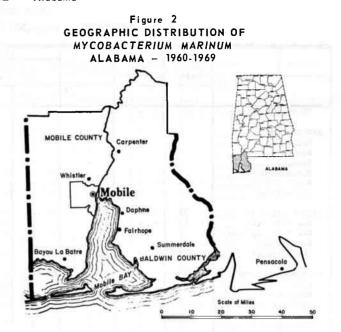
No additional cases were identified by a survey of civilians in the surrounding community near the base, and the outbreak appears to be limited to the Boy Scout group. The exact means of exposure remains unclear.

(Reported by Brig. Gen. Q. J. Serenati, Commanding Surgeon, Headquarters Tactical Air Command, Langley AFB, Virginia; Col. Lawrence R. Sutherland, Capt. James Lehmann, and Capt. Lou Meta, MC USAF, Capt. Jerry P. Dougherty, USAF Bioenvironmental Engineering, and M/Sgt. William C. Counts, USAF Military Public Health, Shaw AFB, Sumter; D. H. Robinson, M.D., Chief, Preventive Health Services, South Carolina State Board of Health; and three EIS Officers.)

"DAPHNE SORE" - Alabama

In the past 8 to 10 years, chronic skin granulomas of the elbow or knee have been seen in children and occasionally adults with a history of swimming in salt water in the Mobile, Alabama, area. The lesions have been called "daphne sores" because several patients lived in or near the town of Daphne, Alabama, on the east side of Mobile Bay (Figure 2). The medical records of 21 patients with this lesion were recently reviewed. The usual history included swimming in Mobile Bay, often sustaining an injury while swimming, which was followed 1 to 3 weeks later by the development of a raised lesion on the elbow or knee. The lesion was usually about 1 cm in diameter, often was crusted, and did not heal. There were no systemic symptoms or enlarged lymph nodes. Only the chronicity of the lesion and occasionally secondary infection or bleeding, resulting from further trauma, caused the individuals to see a physician.

Most of the patients were between 10 and 19 years of age; 10 were males and 11 were females (Table 1). They had been ill from 7 weeks to 2 years before seeking assistance from a physician. Of the 21 medical records, 10 indicated that the patient had a history of trauma, four stated that the patient had no trauma, and seven did not mention trauma. Of the 18 patients on whom skin biopsies were known to have been performed, two were positive for acid-fast bacilli. Mycobacterium marinum was cultured from the biopsy specimens from four people, Runyon Group III M. triviale was cultured from one, and one other culture had original growth that could not be further characterized.



Records also indicated that of three children who had been tuberculin skin tested two had positive reactions.

(Reported by Edward Goldsmith, M.D., Health Officer, Baldwin County, and George Newburn, M.D., Health Officer, Mobile County, Alabama; Frederick S. Wolf, M.D., Director, Bureau of Preventable Diseases, and Thomas Hosty, (Continued on page 364)

Table 1
Line Listing of Culture Proven and Other Probable Southern Alabama Mycobacterium marinum Cases

Sex	Age	Residence	Location of Lesion	Interval From Onset to Diagnosis	Trauma	When Seen	Compatible Biopsy	Mycobacterial Culture	Skin Test
M	15	Daphne	Knee	5 Mo.	+	Dec. 60	+	marinum	ND
M	10	Fairhope	Heel	7 Wk.	+	Nov. 64	-+	marinum	? .
M	58	Mobile	Hand	7 Mo.	/a/ -	Apr. 67	+	marinum	ND
M	16	Fairhope	Elbow	8 Mo.	+	Apr. 69	+	marinum	ND
M	66	Chapman	Finger	2 Yr.	+	Mar. 68	AFB +	+	ND
F	11	Fairhope	Knee	3 Mo.	+	Nov. 68	AFB +	l ND	+
F	51	Fairhope	Arm	7 Wk.	+	Apr. 63	+	_	ND
F	15	Mobile	Knee	1 Yr.		Mar. 66	+		ND
F	11	Mobile	Knee	1 Yr.	?	Apr. 66	+		+
F	14	?	Knee	?	?	Sept. 67	?	_	ND
F	18	Mobile	Knee	4 Mo.		Dec. 68	+	?	ND
M	12	Summerdale	Knee	1 yr.	?	Aug. 69	+	?	ND
F	6	Mobile	Leg	2 Mo.		Jan. 69	+	triviale	ND
M	15	Daphne	Knee	5 Mo.	+	Dec. 60	+	ND	ND
M	7	Fairhope	Knee	10 Mo.	+	Apr. 67	ND	ND	12 201
F	13	Daphne	Knee	?	?	Apr. 68	+	ND	ND
F	5	Bayou le Batre	Leg	2 Mo.	?	Jul. 68	ND	ND	ND
M	2	Mobile	Arm	?	?	Feb. 69	+	ND	ND
F	7	Daphne		?	?	Apr. 69	+	ND	ND
M	16	Fairhope	Elbow	8 Mo.	+	Apr. 69	+	ND	ND
M	16	Daphne	Knee	8 Mo.	+	Jun. 69	+	ND	ND

AFB - Acid-fast bacilli

ND - Not done

^{+ -} Positive

^{- -} Negative

^{? -} Unknown

TABLE III. CASES OF SPECIFIED NOTIFIABLE DISEASES: UNITED STATES

FOR WEEKS ENDED

OCTOBER 11, 1969 AND OCTOBER 12, 1968 (41st WEEK)

	ASEPTIC	BRUCEL-	101		ENCEPHALIT		1	HEPATITIS			
AREA	MENIN- GITIS	LOSIS	DIPHTHERIA		including cases	Post- Infectious	Serum	Infec	tious	MAL	ARIA
	1969	1969	1969	1969	1968	1969	1969	1969	1968	1969	Cum 1969
UNITED STATES	165	6	3	39	57	3	95	923	1,041	69	2,299
	,	_		_	1	_	2	81	68	_	77
W ENGLAND	4_	_		6 -	_ =		_	<u> </u>	5		1 6
Maine.*		-	_		1 _	_ [4		_	
New Hampshire		_	_					2	3	_	
Vermont Massachusetts	4	_		5	1	_	_	53	35	_	4
Rhode Island		l _		1 1	<u> </u>	_	_	15	11	_	I :
Connecticut		_		1		_	2	7	14	_	1 1:
connectitut	-						_	1	``		
DDLE ATLANTIC	32	_	_	4	8	1 1	37	140	201	12	26
New York City	10	_	_	_	2	- 1	23	35	50	_	2
New York, Up-State.	6	_	! -	1	2	_	4	28	34	2	4
New Jersey *	13		_	2	2	-	7	24	79	7	10
Pennsylvania	3		_	11	2	1	3	53	38	3	9
enney realization of			i	- 2				ļ	1		
T NORTH CENTRAL	18		! -	18	34	-	14	152	137	13	25
Ohio	8	-	-	11	20	-	6	41	48	_	2
Indiana	3		_	-	2	- 1	_	3	8	_	2
Illinois	_	_	_	1	6	-	2	43	8	12	16
Michigan	7	_	-	3	5	-	6	57	61	1	5
disconsin	_	_	-	3	1	_	_	8	12	_	1
			1		1						
T NORTH CENTRAL	25	1	-	2	3	_	1	42	47	3	15
Minnesota	25	_	-	_			1	8	18	-	
Iowa	_	_	-		3	-	_	10	5	_	1
Missouri	_	l –	_	_	1 -	-	_	17	19	_	4
North Dakota	_					– i	_	3c	1	_	
South Dakota	_	1	l –	_	l _	_	_	1 1	_	1	
Nebraska	_	_	_	_	l –	-	_	1	-	_	1
Kansas	_	1-1		2	l _	_	_	5	4	2	8
				_					1	_	
UTH ATLANTIC	23	4	_	3	2	2	8	74	134	7	57
Delaware	_	l –	_	-	! –	_	_	2	2	_	
Maryland	2	l <u>-</u>	l _	_	1 1	1 - 1	1	11	11	l 1	1 3
Dist. of Columbia	_	l <u>-</u>	_	_	1 _	_	_	2	l -	l _	
Virginia	10	4	\ _	_	-	l <u>-</u> 1	_	- 7	63	l _	2
West Virginia	1		l	11	_		_	10	2	l	
North Carolina	3	_	_	_	1		2	5	7	4	26
South Carolina	5	_			_	_	_	5	8	2	5
Georgia.	_	l _		l _	<u> </u>		_	9	18		1 17
Florida	2	_		2	1.2	2	5	23	23	_	3
Torica	_	ì	1	_					-	l	
ST SOUTH CENTRAL	20	l _	1 1	1 -	_	_	_	68	42	_	1 11
Kentucky	1	_	s		i _	_	_	27	8	_	8
Tennessee	3	_		_]		_	29	19	L -	l Ì
Alabama	9	_	1	_	-		_	11	8	_	2
Mississippi	7		<u> </u>		_		_	- i	7		1 1
arssissippi					_		_				i
ST SOUTH CENTRAL	3	-	1	2	_	_	3	105	83	20	1.7
Arkansas	_	_		_	_	_	_	4	2		1 1
Louisiana.*	1	_	1	_			2	21	17	l –	1 2
Oklahoma.	_	l _			_]]	_	8	12	1	9
Texas	2		_	2	-		1	72	52	19	1 6
	-			1 -	_		•	1	1	· · ·	1
UNTAIN	_	_	_	1	5	-	1	42	37	1	12
Montana *	_	_	_	<u> </u>	2	_	<u>.</u>	1	9	l -	'
Idaho	_	l <u>-</u>		_	1 -	_	_	2	1		
Wyoming.	_	_	_	_	_	_	_	2	6	_	
Colorado	_	_	_	1	1 1		1	24		1	10
New Mexico	_	_		l <u>'</u>			<u>'</u>	1	5	l <u>'</u>	'`
Arizona		1			1 1				13		1
Mrizona				_	l i	} _	_	1	2		
Nevada	_						_	11	1		1
ne vaua	_	_	_ =	_	_		_	l '' =	l '-	_	1
CIFIC	40	1	1	3	4	_	29	219	292	13	5.5
	19		47 11		1 1	-	29	31	292	13	l í
Washington	2		W m				_	12	16	1	1 1
Oregon	18	1 1	1	2	3	-	20		1		4:
California			1	1		-	29	173	249	12	4.
Alaska	1	_	-	1	-	-	_	1 1	_	-	
Hawaii				<u> </u>	_			2	2		<u> </u>

*Delayed reports: Aseptic meningitis: La. delete 1 Encephalitis, primary: Mont. delete 2

Hepatitis, serum: N.J. 12 Hepatitis, infectious: Me. 8, N.J. 18

TABLE III. CASES OF SPECIFIED NOTIFIABLE DISEASES: UNITED STATES

FOR WEEKS ENDED

OCTOBER 11, 1969 AND OCTOBER 12, 1968 (41st WEEK) - CONTINUED

4	MEA	ASLES (Rube	eola)	MENINGO	COCCAL INT TOTAL	FECTIONS,	MUMPS	P	RUBELLA		
AREA	Cumulative			Cumulative				Total	Paralytic		
	1969	1969	1968	1969	1969	1968	1969	1969	1969	Cum. 1969	1969
UNITED STATES	135	21,000	20,122	29	2,469	2,135	774	2	2	14	337
	_				·						
NEW ENGLAND	2	1,120	1,164	2	97	125	87	_	_	2	24
Maine*	-	320	38 141		6	6 7	5	-	_	1	2
New Hampshire	_	239	141		3	1	5 6		_	_	3 1
Vermont	2	222	363	1	38	64	28		1 🗆 🗆		3
Rhode Island	_	27	6	i	13	9	3				4
Connecticut	-	620	614	-	37	38	40	-	- 1	1	11
IDDLE ATLANTIC	16	7,564	4,157	4	405	384	73			2	28
New York City	8	-4,937	2,174	1	77	78	59	_	_	_	5
New York, Up-State.	3	605	1,233	2	7 9	69	NN	_		1	11
New Jersey	4	923	636	-	160	132	14	-		-	4
Pennsylvania	1	1,099	114	1	89	105	NN	-	-	1	8
AST NORTH CENTRAL	37	2,350	3,886	6	340	258	207		_		113
Ohio	3	393	297	<u>-</u>	124	70	26	-	-	-	14
Indiana	1	468	685	5	45	36	21	-	-	-	19
Illinois	14	576	1,379	-	49	58	31	-	-	-	10
Michigan	11 8	.602	284	1	97 25	74 20	65 64	-	-	-	47
Wisconsin			1,241	- ,	۲,	20	= 04	_		-	23
ST NORTH CENTRAL	12	600 8	393 16	_	126 28	115 27	41	-	-	1	30
Minnesota	_	332	103		28 18	8	32	_		_	18
Iowa Missouri*	_	30	81	_	52	37	2	-	1 2 1	[3
North Dakota	_	15	137	_	2	3	1	_		-	2
South Dakota	-	3	4	_	1	5	NN	_	_	-	_
Nebraska	12	205	42	_	9	8	3	_	-		_
Kansas	_	7	10	-	16	27	3	_	-	1	7
UTH ATLANTIC	8	2,575	1,526	7	427	429	77	_	_	1 -	21
Delaware	-	393	16	- 1	12	8	1	_	i – _	_	_
Maryland	-	77	102	1	40	35	11	-	-	-	2
Dist. of Columbia*.	-	25	6		9	15		5 -	i -	-	1
Virginia	1 2	885 211	299 293	1	54 19	40	7 :	-			3
West Virginia	2	318	283	2	72	13 82	47 NN			= -	4
North Carolina South Carolina	2	125	12		57	58	10	-	_	<u>-</u>	3
Georgia	_	2	4	1	72	86	-		_] _	
Florida	1	539	511	2	92	92	1	_	-	1	7
ST SOUTH CENTRAL	_	113	497	2	150	194	28	_		1_1_	8
Kentucky	-	66	100	- 1	51	89	6	-	_	_	1
Tennessee	-	17	62	2	58	56	22	-	-	-	5
Alabama	-	6	95	- 1	24	26	-	-	-	1	2
Mississippi	-	24	240	Г	17	23	-	-	-	-	_
ST SOUTH CENTRAL	50	4,683	4,889	4	331	313	67	2	2	6	18
Arkansas	2	16	2	- 1	31	20		-	-	-	-
Louisiana	_	122 142	24 125	1 1	89 31	88	1	-	-	-	-
Oklahoma Texas	48	4,403	4,738	2	180	50 155	25 41	2	2	6	1 17
		017									
UNTAIN	_	917	1,007 58	2	49 8	37 6	30 4			+3	23
Idaho.	_	89	21	2	11	11	3		_	_	-
Wyoming	-	-	52		-	2	-				
Colorado	-	141	515	-	8	11	10	_	-		5
New Mexico.	-	264	113		6	-	13	- 7	-	-	3
Arizona		377	222		10	3				-	
Utah Nevada	_	10	21 5	_	4 2	1 3	-		_	_	6
	4.0]		11			
CIFIC	10	1,078	2,603	2	544	280	164	÷:	-	1	72
Washington	1	200	546 534		56 18	44	46	-	-		26
Oregon	8	200 766	534 1,479	_ 2	18 449	199	16	-	-	1 T	14
CaliforniaAlaska	_	9	9		11	3	82 4		_		16
Hawaii.	_	41	35		10	12	16				7
							L	1 -			,

Delayed reports: Measles: D.C. delete 10

Mumps: Me. 6
Poliomyelitis: Me. delete 1 non-paralytic, add 1 paralytic

Rubella: Me. 3, Mo. 29

Morbidity and Mortality Weekly Report

TABLE III. CASES OF SPECIFIED NOTIFIABLE DISEASES: UNITED STATES FOR WEEKS ENDED

OCTOBER 11, 1969 AND OCTOBER 12, 1968 (41st WEEK) - CONTINUED

AREA	STREPTOCOCCAL SORE THROAT & SCARLET FEVER	TETA	ANUS	TULA	REMIA	TYP! FEV		TICK	S FEVER -BORNE . Spotted)		IES IN IMALS
			Cum.		Cum.		Cum.		Cum.		Cum.
	1969	1969	1969	1969	1969	1969	1969	1969	1969	1969	1969
UNITED STATES	6,409	2	121	1	115	10	245	5	415	41	2,729
WEW ENGLAND	799		1		14		12	_	1	2	31
Maine.*	7	-	_	_	_	_	1	-	_ 1	_	6
New Hampshire	11	_	_	_	_	_	_	-	- 1	-	4
Vermont	11	_	_	_	14	_	_	-	_	2	11
Massachusetts	156		1		- 1	-	7	-	1	_	1 2
Rhode Island	38	-	-	-	_	_	1	_	- 1	-	
Connecticut	576	-		_	_	_	3		-	-	8
IIDDLE ATLANTIC	268	-	15	-	5	1	27		43	9	184
New York City	48	-	7	-	1	-	13	-	-	_	
New York, Up-State.	128	-	3	-	4	1	6	-	7	7	17
New Jersey	NN	-	3	-	-	_	3	_	14	_	
Pennsylvania	92	-	2		-	_	5	-	22	2	1:
	406		4.5		4.2	1	0.0			-	100
EAST NORTH CENTRAL	406	2	17	-	13	1	26	-	3	3	197
Ohio	50	2	4	-	-	-	9	_	- 1	_	68
Indiana	122		_		2	-	12	_	-	2	41
Illinois	30	- "	8		4		12	-	3	-	3
Michigan	149	_	5		7	-	4	-	524	7	4:
Wisconsin	55	J - 19	-		7	1	- 1	-		1	1 4
man wannu aresia	426		11		13	1	10		8	5	50
EST NORTH CENTRAL	5		3		13	1	4		°	2	13
Minnesota	130	_					1	1	7	2	7
Iowa	12		4		9	-	3	-	′		12
Missouri		_			-	-		-	_		6
North Dakota	148 30	_	_		_	-			1	1	24
South Dakota	94	_		_	1	Ι	1	1		_	1:
Nebraska	7	_	4	_	3		1	-			6
Kansas	′	_	4	_	د	-	' '	_	_	_	0.
OUTU ATTANTA	568		21	_	21	_	37	2	231	4	662
SOUTH ATLANTIC	13				_		2	_	3		00.
Delaware	58		1	_		<u> </u>	4	_	47		
Maryland	2		2	_		<u></u>	1		4/		
Dist. of Columbia	201		_		4	<u> </u>	i	<u> </u>	75	1	33:
Virginia."	136		1		2	I I	2	_	5		94
West Virginia	NN		2		5	7	6	1	57] [
North Carolina	2		1	_	2	Ī	1		30	_	
South Carolina	13		4		4	<u> </u>	9	1	14	1	7
Georgia	143	_	10		4	Ī	11	<u> </u>	12	2	15
Florida					7					•	
AST SOUTH CENTRAL	1,238		18		12	2	35	1	62	1	36
Kentucky	125		7	_	_	2	8	_	13	_	18
Tennessee	854	_	4	_	11		19	1	41	1	12
	202		5	_	_	_	4	_	5	_	4
Alabama	57	_	2	_	1	_	4		3	_	
inississippi											
EST SOUTH CENTRAL	624	_	21		18	3	28	2	46	11	40
Arkansas	16		1		1	_	13	_	7	_	2
Louisiana.	1	_	7	_	4	_	3	_	- 1	1	3
Oklahoma.	17		1	_	7	_	_	_	28	2	6
Texas	590	-	12	_	6	3	12	2	11	8	28
	111	+				100					
MOUNTAIN	1,145	-	6	1	15	-	24	-	16	1	11
Montana	36	-	1		-	_	2		- !	-	
Idaho	- 150			-	-	-	3		. 5	-	
Wyoming	98	-	-	-	2	-	. 5	-	-	. 1	5
Colorado	695	-	2	-	-	_	3	_	9	_	
New Mexico.	73		-	-	1	-	5		-	-	1
Arizona.*			3		-		5		-		2
Utah	93	-	J - I	1	12	-	71	-	2	-	100
Nevada		-		-	-		1	-	- 1	-	1
	025				,						
ACIFIC	935	1 - 1	11	-	4	2	46	·	5	5	27
Washington	646	- 6-	1	- 1	2	-	2	- 1	3	-	
Oregon	101		-	-	1	_	6	-			
California		-	10	-	1	2	35	-	2	5	26
Alaska	- 68		- 1	-	-	-	-	-	-	-	47.19
Hawaii	1 20	- 10		-	-	-	3	-	-	_	1198
											4

*Delayed reports: SST: Me. 12

Tetanus: Ariz. 1 RMSF: Va. delete 1

Week No.

TABLE IV. DEATHS IN 122 UNITED STATES CITIES FOR WEEK ENDED OCTOBER 11, 1969

4.1

(By place of occurrence and week of filing certificate. Excludes fetal deaths)

742 248 41 27 21 58 31 25 28 50 69 16 41 30 57	65 years and over 448 133 27 18 15 27 23 14 19 33 36 12 24 25 42	and Influenza All Ages 41 10 3 5 - 1 2 2 2 5 5 5	1 year A11 Causes 35 22 1 - 1 5 - 1 3	SOUTH ATLANTIC: Atlanta, Ga Baltimore, Md Jacksonville, Fla Miami, Fla Norfolk, Va Richmond, Va Savannah, Ga St. Petersburg, Fla	1,240 160 228 67 87 112 59	65 years and over 644 78 122 29 36 61 25	Pneumonia and Influenza All Ages 48 1 5 2 2 2	/Under 1 / year All- Causes 72 12 15 9 6
248 41 27 21 58 31 25 28 50 69 16 41 30 77	133 27 18 15 27 23 14 19 33 36 12 24	10 3 5 - 1 2 2 2 2 - 5 5	22 1 - 1 5 - 1 3	Atlanta, Ga Baltimore, Md Charlotte, N. C Jacksonville, Fla Miami, Fla Norfolk, Va Richmond, Va Savannah, Ga	160 228 67 87 112 59	78 122 29 36 61 25	1 5 2 2	12 15 9 6
41 27 21 58 31 25 28 50 69 16 41 30 57	27 18 15 27 23 14 19 33 36 12 24	3 5 - 1 2 2 2 2 - 5	1 5 - 1 3	Atlanta, Ga Baltimore, Md Charlotte, N. C Jacksonville, Fla Miami, Fla Norfolk, Va Richmond, Va Savannah, Ga	160 228 67 87 112 59	122 29 36 61 25	5 2 2	15 9 6
27 21 58 31 25 28 50 69 16 41 30 57	18 15 27 23 14 19 33 36 12 24	5 1 2 2 2 2 - 5	1 5 - 1 3	Baltimore, Md Charlotte, N. C Jacksonville, Fla Miami, Fla Norfolk, Va Richmond, Va Savannah, Ga	67 87 112 59 91	29 36 61 25	2 2 -	9 6
21 58 31 25 28 50 69 16 41 30 57	15 27 23 14 19 33 36 12 24 25	1 2 2 2 2 - 5	1 5 - 1 3	Charlotte, N. C Jacksonville, Fla Miami, Fla Norfolk, Va Richmond, Va Savannah, Ga	87 112 59 91	36 61 25	2	6
58 31 25 28 50 69 16 41 30 57	27 23 14 19 33 36 12 24 25	1 2 2 2 - 5 2	5 - 1 3	Jacksonville, Fla Miami, Fla Norfolk, Va Richmond, Va Savannah, Ga	112 59 91	61 25	-	
31 25 28 50 69 16 41 30 57	23 14 19 33 36 12 24 25	2 2 2 - 5 2	- 1 3	Miami, Fla Norfolk, Va Richmond, Va Savannah, Ga	59 91	25		,
25 28 50 69 16 41 30 57	14 19 33 36 12 24 25	2 2 - 5 2	1 3	Norfolk, Va Richmond, Va Savannah, Ga	91		6	4
28 50 69 16 41 30 57	19 33 36 12 24 25	2 - 5 2	1 3	Richmond, VaSavannah, Ga				2
50 69 16 41 30 57	33 36 12 24 25	- 5 2	3	Savannah, Ga		52	9	7
69 16 41 30 57	36 12 24 25	5 2			31	13	3	1
16 41 30 57	12 24 25	2	1		84	73	6	1
41 30 57 3,254	24 25		1150	Tampa, Fla	55	31	4	3
30 57 3,254	25	5	-	Washington, D. C	222	107	7	9
57 3,254			-	Wilmington, Del	44	17	3	3
3,254	42	-	-	,				
	. –	4	1	EAST SOUTH CENTRAL:	592	311	27	31
	1,908	113	121	Birmingham, Ala	94 60	33	7	7 2
62	29	2	2	Chattanooga, Tenn	40	19	l í	3
51	33	5	1	Knoxville, Tenn	115	68	12	7
140	80	2	3	Louisville, Ky	138	58	2	6
				Memphis, Tenn		1		2
						1		1
						1 .	1	3
				Nasnville, Tenn	, 0	7,7		
			1	UPCT COUTH CENTER .	1 126	596	43	64
						1		3
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								1 2
								13
_			1			1		2
			8			1		5
						1		16
								- 10
			220					6
			_					5
			1					8
								1
	' '	3				1		_
2,629	1,494	70	153	larsa, okra,				
77	47	2	3	MOUNTAIN:	489	282	19	24
35	21	2	1		55	32	2	3
699	381	21	49		30	19	2	-
155	92	2	8		138	86	4	8
220	129	4	15		25	15	1	1
138	62	-	9		103	52	1	7
84	49	1	4		33	16	4	2
335	186	7	8		44	27	-	1
32	21	2	4		61	35	5	2
66	39	2	3					
55	35	4	5	PACIFIC:	1.558	906	24	62
37	12	-	5		31	20	-	1
44	33	2			47	24		2
158	87	4	10		26		-	2
63	30	5	5		30		-	ī
140	86	2	4		95	48		1
50	26	_	8				9	17
40	31	7	4		79	46	1	4
39	25	2	2				i	
89	56	1	1				(47	4
73	46	-	5		59	31	-	1
			7		99	40	1	14
817	503	26	34		179	98	6	7
59	39	-	3		33	21	_	M 1
23	11	2	_		129	80	3	2
73	41	4	4		48	28	_	3
133	84	2	6		34	21	-	2
27	13	-	-	,		ļ	1	
92	62	1	5	Total	12,447	7.092	411	596
66	41	2	2					-
223	127	5	8	Expected Number	11,983	6.888	366	511
66	49	2	2				-	-
55	36	8	4	Cumulative Total (includes reported corrections for previous weeks)	532,145	304,108	24,367	25,13
	77 35 699 155 220 138 84 335 32 66 55 37 44 158 63 140 50 40 39 89 73 817 59 23 73 133 27 92 66 223 66	30 21 31 17 58 33 67 26 ,653 971 41 27 486 278 193 108 35 26 104 66 31 23 41 27 80 39 52 31 29 21 27 19 ,629 1,494 77 47 35 21 699 381 155 92 220 129 138 62 84 49 335 186 32 21 66 39 55 35 37 12 44 33 158 87 63 30 140 86 50 26 40 31 39 25 89 56 73 46 817 503 59 39 23 11 73 46 817 503 59 39 23 11 73 46 817 503 59 39 20 21 21 27 22 20 21 29 22 20 21 29 22 20 21 29 22 20 21 29 22 20 23 35 36 32 26 39 27 44 33 28 49 39 56 70 26 71 36 72 46 73 46 74 37 36 75 39 76 39 77 46 78 39 78 46 78 39 78 46 817 503 89 56 79 39 20 31 11 73 41 133 84 27 13 92 66 49 55 36 49 55 36	30	30	30	33	33	43

†Estimate - based on average percent of divisional total.

"DAPHNE SORE" - (Continued from page 359)

Director, Laboratories, Alabama State Department of Public Health; the Mycobacteriology Unit, Bacteriology Section, Laboratory Division, and the Tuberculosis Branch, State and Community Services Division, NCDC; and an EIS Officer.)

Editorial Comment:

The original isolation of M. marinum was made from fish in the Philadelphia aquarium in 1926. Human skin infections with M. marinum (balnei) associated with swimming pool injuries have been called "swimming pool granuloma," and several large outbreaks have been described.2 M. marinum infection following injury and swimming in pools filled with salt water has been reported from Canada³, England⁴, Scotland⁵, and following swimming in the Pacific Ocean⁶ and in the Potomac River.⁷

From 1960 to the present, 14 cultures sent to the NCDC Mycobacteriology Laboratory have been identified as M. marinum. Review of the case histories of these 14 individuals shows that several of them had a history of trauma and association with salt water. Cases occurred in a Delaware woman injured on a barnacle, two persons from Maryland with a history of trauma while swimming in Chesapeake Bay, a Newport News, Virginia, shipyard worker, a Georgia woman injured on a North Carolina beach, a Louisiana oyster fisherman, and a Washington woman injured on coral in Acapulco, Mexico.

Association of positive skin test sensitivity to PPD-S following infection with M. marinum has been well described^{8,9}; however, no study has been conducted to define the significance of this infection as a causative factor in positive tuberculin tests in children and adults in the Gulf Coast and Chesapeake Bay areas.

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- 6. Walker, H. H., et al.: Some Characteristics of "Swimming Pool"Disease in Hawaii. Hawaii Med J 21:403-409, 1962.
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- 9. Eilertsen, Eilert: Swimming Pools as a Source of Non-Specific Tuberculin Reactions. Scand J Resp Dis 48:238-248, 1967.

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DIRECTOR, NATIONAL COMMUNICABLE DISEASE CENTER

DIRECTOR EPIDEMIOLOGY PROGRAM MANAGING EDITOR

DAVID J. SENCER, M.D. A. D. LANGMUIR, M.D. MICHAEL B. GREGG, M.D. ALAN R. HINMAN, M.D.

ADDITION TO THE ESTABLISHED PROCEDURES FOR REPORTING MORBIDITY AND MORTALITY, THE NATIONAL COMMUNICABLE DISEASE CENTER WELCOMES ACCOUNTS OF INTERESTING OUTBREAKS OR CASE INVESTIGATIONS WHICH ARE OF CURRENT INTEREST TO HEATH OFFICIALS AND WHICH ARE DIRECTLY RELATED TO THE CONTROL OF COMMUNICABLE DISEASES. SUCH COMMUNICATIONS SHOULD BE ADDRESSED TO:

NATIONAL COMMUNICABLE DISEASE CENTER

ATTN: THE EDITOR
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NOTE: THE DATA IN THIS REPORT ARE PROVISIONAL AND ARE BASED ON WEEKLY TELEGRAMS TO THE NCDC BY THE INDIVIDUAL STATE HEALTH DEPARTMENTS. THE REPORTING WEEK CONCLUDES AT CLOSE OF BUSINESS ON FRIDAY; COMPILED DATA ON A NATIONAL BASIS ARE OFFICIALLY RELEASED TO THE PUBLIC ON THE SUCCEED-

COMMUNICABLE ATLANTA, GEORGIA 30333 OFFICIAL BUSINESS DISEASE CENTER

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